

Case No.

*In re. Investigation of election irregularities affecting
Congressional District 9*

Exhibit

4.2.6.1.1

Description: Example of most current Absentee Application and Certificate (a/k/a the “ballot return envelope”).



NORTH CAROLINA

State Board of Elections & Ethics Enforcement

Absentee Application and Certificate

Fraudulently or Falsely completing this form is a Class I felony under Chapter 163 of the N.C. General Statutes

The following people are PROHIBITED from signing the Witnesses' Certification:

For all voters: a candidate, UNLESS the candidate is the voter's near relative;
For voters who are patients or residents of a hospital, clinic, nursing home, or adult care home: (1) an owner, manager, director, or employee of that facility; (2) an individual who holds any federal, State, or local elective office; and (3) an individual who holds office in a State, congressional district, county or precinct political party or organization, or who is a campaign manager or treasurer for any candidate or political party.

Affix NON-BARCODE

Label HERE

Affix BARCODE

Label HERE

Board Approval Date _____

☐ **Second Primary Request or Runoff Request**
In the event that a Second Primary (or Runoff Election) is called, I request that an absentee application and ballot be issued to me and mailed to me. (Check the box to receive eligible ballots.)

☐ **Annual Request for Illness/Disability**
Due to continued or expected illness or disability, I request that this application be a request for absentee ballots for any other elections to be held this calendar year in which I am eligible to participate. (Check the box to receive eligible ballots.)

Signature of Voter (if applicable) _____

Address where application and ballots should be mailed _____

Voter's Certification (Required)

I am applying for an absentee ballot • I am a duly qualified voter, registered as an affiliate of the political party indicated on this application • All information represented on this application is correct • I am entitled to vote in this election • If I am an *Unaffiliated* voter voting in a primary election, I am voting in the party primary indicated on the attached label • If the party indicated is (UNA), I am voting a nonpartisan ballot.

I further certify that I marked the enclosed ballot (or it was marked for me according to my instructions) in the presence of:

☐ two (2) witnesses who are at least 18 years of age and who are not disqualified by law to witness the casting of my absentee ballot (the witnesses must complete the **Option 1** of the *Witnesses' Certification*)

OR

☐ a notary public (the notary must complete **Option 2** of the *Witnesses' Certification*)

X _____
Signature of Voter (Required) Date

Name Correction (if applicable)

Voter Assistant Certification (if applicable)

I certify that: • The voter requested my assistance • I assisted the Voter by marking the ballot only according to the Voter's instruction; and/or I assisted the Voter in completing the *Absentee Application and Certificate* • I assisted the Voter only in the Voter's presence • I am the Voter's near relative or verifiable legal guardian, or I am providing assistance because a near relative or legal guardian is unavailable to assist the Voter.

Name of Assistant Address of Assistant

X _____
Signature of Assistant Date

Witnesses' Certification

Option 1: Two (2) Witnesses (Required Unless a Notary Public is the Witness)

I certify that: • I am at least 18 years old • I am not disqualified from witnessing the ballot as described in the WARNING on the flap of this envelope • The Voter marked the enclosed ballot in my presence, or caused it to be marked in the Voter's presence according to his/her instruction • The Voter signed this *Absentee Application and Certificate*, or caused it to be signed • I respected the secrecy of the ballot and the Voter's privacy, unless I assisted the Voter at his/her request [complete *Voter Assistant Certification* section].

Witness #1	Witness #2
Signature (Required)	Signature (Required)
Street Address (Required)	Street Address (Required)
City, State and Zip (Required)	City, State and Zip (Required)
_____ Date _____	_____ Date _____

Option 2: Notary Public as Witness (Required Unless Two Witnesses Provided)

I certify that: on the _____ day of _____, 20_____, the Voter: _____ personally appeared before me, was positively identified, and in my presence, the Voter marked the enclosed ballot, or caused it to be marked in the Voter's presence according to his/her instruction • The Voter signed this *Absentee Application and Certificate*, or caused it to be signed • I am at least 18 years old • I am not disqualified from witnessing the ballot as described in the WARNING on the flap of this envelope • I respected the secrecy of the ballot and the privacy of the Voter, unless I assisted the Voter at his/her request [complete *Voter Assistant Certification* section].

NOTE: A notary may not charge any fee for witnessing and affixing a notarial seal to an absentee ballot application or certificate. [G.S. § 10B-30].

STATE OF _____

COUNTY OF _____

Notary Public _____ Commission Expiration Date _____

SEAL